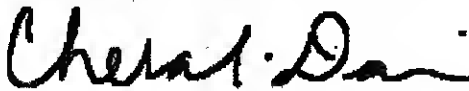


FACILITY EVALUATION REPORT (Cont)CCLD Regional Office, 1000 CORPORATE DR #100
MONTEREY PARK, CA 91754**FACILITY NAME:** COURT YARD ESTATES**FACILITY NUMBER:** 198205250**VISIT DATE:** 02/20/2019**NARRATIVE**

1 The licensing investigation determined that Licensee's failure to provide care and supervision
2 caused R1 to suffer serious bodily injury. On January 14, 2019, the Licensee was informed that a
3 civil penalty maybe assessed pursuant to the Health & Safety Code section 1589.49(f).
4
5 The Department has concluded its investigation and analysis regarding the care afforded to R1 by
6 the Licensee and has determined that a Civil Penalty per Health and Safety Code 1589.49(f) for
7 \$10,000 is warranted for serious bodily injury. The Welfare and Institution Code § 15610.67 defines
8 serious bodily injury as "an injury involving extreme physical pain, substantial risk of death, or
9 protracted loss or impairment of function of a bodily member, organ, or of mental faculty, or
10 requiring medical intervention, including, but not limited to hospitalization, surgery, or physical
11 rehabilitation ."
12
13 Appeal rights were provided.
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SUPERVISOR'S NAME: Myriam Luga**TELEPHONE:** (323) 980-4932**LICENSING EVALUATOR NAME:** Chereki Davis**TELEPHONE:** (323) 980-4935**LICENSING EVALUATOR SIGNATURE:****DATE:** 02/20/2019

I acknowledge receipt of this form and understand my appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 02/20/2019

